

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000056117 (1)

1. Corporation Name

ASCENCION STUDIOS, INC.



Principal Place of Business

Mailing Address

6826 SW 81 STREET
MIAMI FL 33143

6826 SW 81 STREET
MIAMI FL 33143

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/18/1995

3a. Date of Last Report

4. FEI Number

65-0600392

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

EDWARDS, WILLIAM N
7224 S.W. 132 COURT
MIAMI FL 33183

81 Name

ISABEL L. EDWARDS

82 Street Address (P.O. Box Number is Not Acceptable)

7224 SW 132 Court

83

84 City

MIAMI

FL

85

Zip Code

33183

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Isabel L. Edwards ISABEL L. EDWARDS

April 15, 1996

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME EDWARDS, WILLIAM N
STREET ADDRESS 7224 SW 132 COURT
CITY-STATE-ZIP MIAMI FL 33183 ☐ DELETE

TITLE SD
NAME CEVALLOS, ALFREDO
STREET ADDRESS 8981 SW 122 PLACE #1019
CITY-STATE-ZIP MIAMI FL 33186 ☐ DELETE

TITLE TD
NAME EDWARDS, ISABEL L
STREET ADDRESS 7224 SW 132 COURT
CITY-STATE-ZIP MIAMI FL 33183 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE PRESIDENT
2. NAME EDWARDS, ISABEL L.
3. STREET ADDRESS 7224 S.W. 132 COURT
4. CITY-STATE-ZIP MIAMI, FL 33183 ☒ Change ☐ Addition

2. TITLE
2. NAME
2. STREET ADDRESS
2. CITY-STATE-ZIP ☐ Change ☐ Addition

3. TITLE AIDAN J. SULLIVAN
3. NAME
3. STREET ADDRESS 6825 SW 81 Street
3. CITY-STATE-ZIP MIAMI, FL 33143 ☒ Change ☐ Addition

4. TITLE
4. NAME
4. STREET ADDRESS
4. CITY-STATE-ZIP ☐ Change ☐ Addition

5. TITLE
5. NAME
5. STREET ADDRESS
5. CITY-STATE-ZIP ☐ Change ☐ Addition

6. TITLE
6. NAME
6. STREET ADDRESS
6. CITY-STATE-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Isabel L. Edwards ISABEL L. EDWARDS, PRES. 4/15/96 665-7765

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)